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7590

10/04/2005

John P White
 Cooper & Dunham
 1185 Avenue of the Americas
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John P. White

(Depositor's name)

John P. White

(Signature)

January 4, 2006

(Date)

01/10/2006 CNGUYEN3 00000052 09980853

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/980,853	03/12/2002	Jonathan M. Barasch	58040-A-PCT-US/JPW/FHB	3274

TITLE OF INVENTION: METHOD OF INDUCTING FORMATION OF KIDNEY EPITHELIA FROM MESENCHYMAL PRECURSORS

01/11/2006 CNGUYEN3 00000017 033125 09980853

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$700	01/04/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
WITZ, JEAN C	1651	424-085200

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 John P. White, Esq.

2 Cooper & Dunham LLP

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

THE TRUSTEES OF COLUMBIA UNIVERSITY
 IN THE CITY OF NEW YORK

New York, New York

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee (No small entity discount permitted)☒ Advance Order - # of Copies 13

4b. Payment of Fee(s):

☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 03-3125 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date January 4, 2006

Typed or printed name

John P. WhiteRegistration No. 28,678

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